New adoption policy

2911. SHRIMATI PREMA CARIAPPA:
SHRIMATI SHOBHANA BHARTIA:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether Government are formulating a new adoption policy where registration of all adoptable children in the country would be done, on the lines of birth and death registration;

(b) whether the new adoption policy would be a revised set of guidelines for in-country and inter-country adoptions;

(c) whether registration of all adoptable children in India would be made mandatory, just as birth and death registration, have been made compulsory, to establish how many male and female children are there for adoption; and

(d) by when a final decision in this regard is likely to be taken?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) to (d) The existing guidelines for In-country aud Inter-country adoption have been reviewed for appropriate consideration. As per the draft guidelines, a procedure is to be followed for registration of all orphaned, abandoned and surrendered children and adoptions of such children will be done only if duly registered. As the revised guidelines have to be processed as per laid down procedure, specific time frame cannot be indicated.

Anganwadi workers

2912. SHRI MATILAL SARKAR: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) the number of Anganwadi workers of different categories engaged in different States and Union Territories;

(b) the amount of salary/wages in each category;

(c) the nature of duties they have to perform; and

(d) the steps contemplated by Government to regularize their services?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The details of Anganwadi Workers sanctioned and in position as on 31.3.2007, State-wise, are given in the Statement-I (*See* below). The honorarium being paid to Anganwadi Workers out of grant-in-aid released by the Government of India ranges from Rs.938/- to Rs.1063/- per month, depending upon their qualification and experience.

(c) The details of the Role and Responsibilities of Anganwadi Workers are given in the Statement-II (*See* below).

(d) The ICDS Scheme envisages Anganwadi Worker to be an honorary worker, who is paid honorarium as decided by Government of India from time to time. As such, there is no proposal under the consideration of the Government to regularize their services.

Statement-I

Number of Anganwadi Workers

SL No.	State/UT	Sanctioned as on 31.3.05	Sanctioned during 2005-06	Sanctioned during 2006-07	Total Sanctioned as on 31.3.2007	In-position
1	Andhra Pradesh	56539	9562	7843	73944	60173
2	Arunachal Pradesh	2359	678	1240	4277	3037
3	Assam	25416	6659	5007	37082	24443
4	Bihar	60813	19715	560	81088	60041
5	Chhattisgarh	20289	9148	5500	34937	25976
6	Goa	1012	0	100	1112	1010
7	Gujarat	37961	3523	2695	44179	35837
8	Haryana	13546	2813	833	17192	16328
9	Himachal Pradesh	7354	10894	0	18248	7031
10	Jammu and Kashmir	18772	0	6711	25483	16409
11	Jharkhand	24171	6683	1243	32097	22257
12	Karnataka	40301	11313	2646	54260	45275
13	Kerala	25393	3258	3464	32115	27935
14	Madhya Pradesh	49787	9537	9914	69238	52667
15	Maharashtra	62126	12864	9877	84867	72395

16	Manipur	4501	0	3120	7621	4495
17	Meghalaya	2218	961	209	3388	3162
18	Mizoram	1361	231	90	1682	1592
19	Nagaland	2770	265	159	3194	2687
20	Orissa	34201	3279	4217	41697	35139
21	Punjab	14730	2691	2748	20169	14615
22	Rajasthan	35821	11041	1510	48372	42634
23	Sikkim	500	488	0	988	805
24	Tamil Nadu	.42677	3049	1539	47265	43946
25	Tripura	3874	2220	1257	7351	5854
26	Uttar Pradesh	106059	31498	13170	150727	122341
27	Uttaranchal	6658	1134	1872	9664	7653
28	West Bengal	57540	17100	17512	92152	52714
29	A and N Islands	527	94	51	672	621
30	Chandigarh	300	29	41	370	329
31	Delhi	3902	526	1678	6106	4425
32	Dadra and N Haveli	138	77	4	219	138
33	Daman and Diu	87	10	10	107	91
34	Lakshadweep	74	0	13	87	74
35	Pondicherry	677	11	0	688	688
	ALL INDIA:	7644541	181351	106833	1052638	8148171

Statement-II

Role and responsibilities of AWWs

(i) To elicit community support and participation in running the programme.

(ii) To weigh each child every month, record the weight graphically on the growth card, use referral card for referring cases of mothers/ children to the sub-centres/PHC etc., and maintain child cards for children below 6 years and produce these cards before visiting medical and para-medical personnel.

(iii) To carry out a quick survey of all the families, especially mothers and children in those families in their respective area of work once in a year.

(iv) To organise non-formal pre-school activities in the anganwadi of children in the age group 3-6 years of age and to help in designing and making of toys and play equipment of indigenous origin for use in anganwadi.

(v) To organise supplementary nutrition feeding for children (0-6 years) and expectant and nursing mothers by planning the menu based on locally available food and local recipes.

(vi) To provide health and nutrition education and counseling on breastfeeding/Infant and young feeding practices to mothers. Anganwadi Workers, being close to the local community, can motivate married women to adopt family planning/birth control measures

(vii) AWWs shall share the information relating to births that took place during the month with the Panchayat Secretary/Gram Sabha Sewak/ ANM whoever has been notified as Registrar/Sub Registrar of Births and Deaths in her village.

(viii) To make home visits for educating parents to enable mothers to plan an effective role in the child's growth and development with special emphasis on new born child.

(ix) To maintain files and records as prescribed.

(x) To assist the PHC staff in the implementation of health component of the programme *viz.* immunisation, health check-up, ante natal and post natal check etc.

(xi) To assist ANM in the administration of IFA and Vitamin A by keeping stock of the two medicines in the Centre without maintaining stock register as it would add to her administrative work which would effect her main functions under the Scheme.

(xii) To share information collected under ICDS Scheme with the ANM. However, ANM will not solely rely upon the information obtained from the records of AWW.

(xiii) To bring to the notice of the Supervisors/CDPO any development in the village which requires their attention and intervention, particularly in regard to the work of the coordinating arrangements with different departments.

(xiv) To maintain liaison with other institutions (Mahila Mandals) and involve lady school teachers and girls of the primary/middle schools in the village which have relevance to her functions.

(xv) To guide Accredited Social Health Activists (ASHA) engaged under National Rural Health Mission in the delivery of health care services and maintenance of records under the ICDS Scheme.

(xvi) To assist in implementation of Kishori Shakti Yojana (KSY) and motivate and educate the adolescent girls and their parents and community in general by organzing social awareness programmes/ campaigns etc.

(xvii) AWW would also assist in implementation of Nutrition Programme for Adolescent Girls (NPAG) as per the guidelines of the Scheme and maintain such record as prescribed under the NPAG.

(xviii) Anganwadi Worker can function as depot holder for RCH Kit/ contraceptives and disposable delivery kits. However, actual distribution of delivery kits or administration of drugs, other than OTC (Over the Counter) drugs would actually be carried out by the ANM or ASHA as decided by the Ministry of Health and Family Welfare.

(xix) To identify the disability among children during her home visits and refer the case immediately to the nearest. PHC or District Disability Rehabilitation Centre.

(xx) To support in organizing Pulse Polio Immunization (PPI) drives.

(xxi) To inform the ANM in case of emergency cases like diahorrea, cholera etc.

Measuring the magnitude of missing children

2913. SHRIMATI SUPRIYA SULE: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether the Centre for Social Research has suggested that ward level committees, alongwith civil society and elected representatives, should get down to measuring the magnitude of missing children and effectively implement the Integrated Child Protection Scheme;

(b) whether 35 million homeless children need protection, but only 35,000 have been provided shelters by Government;

(c) whether CSR cited various media reports, and expressed concern over girl child abuse and drug abuse going on in several tourist destinations like Goa, Maharashtra, Kerala, Karnataka, Orissa and Tamil Nadu; and